



# LEXINGTON RECREATION DEPARTMENT SWIM LESSON REGISTRATION FORM

Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
Address \_\_\_\_\_ Town/Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_  
Email Address (please print): \_\_\_\_\_  
Emergency Contact (Name & Phone) \_\_\_\_\_

D.O.B. \_\_\_\_\_ Age \_\_\_\_\_ Grade as of 9/14 \_\_\_\_\_ Male ☐ Female ☐

You can register for an **UNLIMITED** number of swim lesson sessions before the start of the summer. There are no restrictions as in previous years. If a child is registered for an unsuitable level (i.e. has not passed the previous level) he or she will be transferred into the appropriate level class if space is available. **A \$10.00 transfer fee will be charged and must be paid before the child is able to participate.** Swim lesson registration will close **at 7:00pm on the Friday before each session starts.** **No additional registrations will be accepted after this time.** No confirmation will be sent. You will be notified only if your choice is unavailable. **REFUNDS ARE NOT GIVEN.**

I/We, the parent(s)/guardian(s) of \_\_\_\_\_ a minor, hereby consent to his/her participation in the Town of Lexington Recreation Department programs, pictures to be taken of my/our child for advertisement and/or promotion of program and to his/her use of the recreational facilities and equipment of the Town of Lexington. I/We further agree to release and save harmless the Town of Lexington, its officers, employees, agents, and attorneys from any and all liability or expenses arising out of any incident involving, or on account of any injury to the above named minor in connection with such program, hereby give permission to the Town of Lexington Recreation Department staff to provide and administer immediate first aid and authorize a physician at a local hospital to secure proper treatment for my/our child as named above if the need arises.

Participant's Signature \_\_\_\_\_ Date \_\_\_\_\_  
(Parent/Guardian Signature required if participant is under 18)

Please print Parent/Guardian Name: \_\_\_\_\_

**Please check the session and lesson you are registering for.**

Session 1: ☐ Wednesday, June 25—July 4      Session 3: ☐ July 21—Aug. 1 (Mon.—Fri.)  
Session 2: ☐ July 7—July 18 (Mon.—Fri.)      Session 4: ☐ Aug. 4—Aug. 15 (Mon.—Fri.)

## Classes

## Times

Parent & Child Level 1	<input type="checkbox"/> 10:15—10:45	<input type="checkbox"/> 4:45—5:15	<b>SWIM TAG #:</b> _____	
Parent & Child Level 2	<input type="checkbox"/> 11:25—11:55	<input type="checkbox"/> 5:20—5:50		
Preschool Aquatics	<input type="checkbox"/> 10:50—11:20	<input type="checkbox"/> 4:45—5:15		
Level 1	<input type="checkbox"/> 9:40—10:10	<input type="checkbox"/> 10:15—10:45	<input type="checkbox"/> 10:50—11:20	<input type="checkbox"/> 5:20—5:50 <input type="checkbox"/> 6:30—7:00
Level 2	<input type="checkbox"/> 9:40—10:10	<input type="checkbox"/> 10:15—10:45	<input type="checkbox"/> 11:25—11:55	<input type="checkbox"/> 4:45—5:15 <input type="checkbox"/> 5:40—6:10 <input type="checkbox"/> 6:30—7:00
Level 3	<input type="checkbox"/> 9:00—9:30	<input type="checkbox"/> 9:40—10:10	<input type="checkbox"/> 10:50—11:20	<input type="checkbox"/> 11:25—11:55 <input type="checkbox"/> 4:30—5:00 <input type="checkbox"/> 5:20—5:50 <input type="checkbox"/> 6:15—6:45
Level 4	<input type="checkbox"/> 9:00—9:30	<input type="checkbox"/> 9:40—10:10	<input type="checkbox"/> 10:15—10:45	<input type="checkbox"/> 5:05—5:35 <input type="checkbox"/> 5:55—6:25
Level 5	<input type="checkbox"/> 9:00—9:30	<input type="checkbox"/> 11:25—11:55	<input type="checkbox"/> 5:55—6:25	
Level 6 <i>Personal Water Safety</i>	<input type="checkbox"/> 9:00—9:30	<input type="checkbox"/> Sessions 1 & 4	<input type="checkbox"/> 10:50—11:20	<input type="checkbox"/> Sessions 1 & 4 <input type="checkbox"/> 5:55—6:25 <input type="checkbox"/> Session 3
Level 6 <i>Fitness Swimmer</i>	<input type="checkbox"/> 9:00—9:30	<input type="checkbox"/> Session 2	<input type="checkbox"/> 10:50—11:20	<input type="checkbox"/> Session 2 <input type="checkbox"/> 5:55—6:25 <input type="checkbox"/> Sessions 1 & 4
Level 6 <i>Fundamentals of Diving</i>	<input type="checkbox"/> 9:00—9:30	<input type="checkbox"/> Session 3	<input type="checkbox"/> 10:50—11:20	<input type="checkbox"/> Session 3 <input type="checkbox"/> 5:55—6:25 <input type="checkbox"/> Session 2

Swim Team (full season): ☐ Ages 10 and under 4:30—5:15 p.m. - All Summer registration (\$160)  
(Monday—Thursday) ☐ Ages 11 and up 5:15—6:00 p.m. - All Summer registration (\$160)  
Swim Team (two week session): ☐ Ages 10 and under 4:30—5:15 p.m. - Two week session (\$50) **Please check session above.**  
(Monday—Thursday) ☐ Ages 11 and up 5:15—6:00 p.m. - Two week session (\$50) **Please check session above.**

Other Classes (Adaptive, Adult, Jr. Lifeguarding, Lifeguard Training, WSI Aide) Class \_\_\_\_\_ Date/Session \_\_\_\_\_

Type of Payment: ☐ VISA    ☐ MASTERCARD    ☐ DISCOVER    ☐ CHECK    ☐ CASH

Card Account Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
Month/Year

Cardholder Signature: \_\_\_\_\_

Make checks payable to: **TOWN OF LEXINGTON** and mail with registration form to: Lexington Recreation Department  
1625 Massachusetts Avenue  
Lexington, MA 02420

**YOU MAY ALSO USE THE TOWN HALL DROP BOX IN FRONT OF CARY HALL**